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## UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attome	y Docket No.	TI-35951	
First N	amed Inventor or Application	Identifier	Christo P. Bojkov, et al.
Title	Direct Bumping on Int to-Insulator Adhesion	~	rcuit Contacts Enabled by Metal-
Evnnes	s Mail I ahel No	EV22446	22616

APPLICATION See MPEP Chapter 600 concern	ADDF	DDRESS TO:  Assistant Commissioner for Patents Box Patent Application Washington, DC 20231									
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)											
	Specification (preferred arrangement set forth below)  - Descriptive title of the Invention [Total Pages 26]			Nucle (if ap	Microfiche Computer Program (Appendix)  sotide and/or Amino Acid Sequence Submission colicable, all necessary)  Computer Readable Copy						
	- Cross References to Related Applications					Computer Readable (	Сору	510/6			
	<ul> <li>Statement Regarding Fed sponsored R&amp;D</li> <li>Reference to Microfiche Appendix</li> </ul>					Paper Copy (identical	to computer cop				
	Background of the Invention     Brief Summary of the Invention					c. Statement verifying identical of above copies					
<ul> <li>Brief Description of the</li> <li>Detailed Description</li> </ul>	Brief Description of the Drawings (if filed)     Detailed Description					ACCOMPANYING APPLICATION PARTS					
<ul> <li>Claim(s)</li> <li>Abstract of the Disclos</li> </ul>	- Claim(s) - Abstract of the Disclosure				8. Assignment Papers (cover sheet & Documents(s))						
3. X Drawing(s) (35 USC d1	13) [Total Sheets	2	J 9.			3.73(b) Statement re is an assignee)	X Power Attorne				
4. Oath or Declaration un	4. Oath or Declaration unsigned [Total Pages 1]				English Translation Document (if applicable)						
a. Newly Executed	(original or copy)		11.			n Disclosure t (IDS)/PTO-1449	Copies Citation				
b. Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed)					Preliminar	y Amendment					
[Note Box 5 below]				X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)							
i.  DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s) named in the prior application,				Small Entity Statement(s)  (PTO/SB/09-12)  Statement filed in prior application Status still proper and desired							
see 37 CFR §1.63(d)(2) and 1.33(b).					Certified Copy of Priority Document(s) if foreign priority is claimed)						
	nce (useable if Box 4b is checked) the prior application, from which a		16.		Other:	,					
the oath or declaration is being part of the disclos											
hereby incorporated by		A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.									
17. If a CONTINUING APPLICA		• •				•		lment:			
☐Continuation ☐  Prior application informa		tinuation	-in-part	(CIP)		of prior application Froup / Art Unit:	n No:				
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Customer Number or Bar Code Label  Customer Number or Bar Code Label  (Insert Customer No. or Attach bar code label here)  or Correspondence address below											
NAME											
ADDRESS CITY STATE TX ZIP CODE											
COUNTRY TELEPHONE (972) 917-5653 FAX (972) 917-4418							118				
Name (Print/Type)	Michael K. Skrehot			Reg	istration N	o. (Attorney/Agent)	36,682				
Signature	Welse	1				Date /0-20-0	3				

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **FEE TRANSMITTAL** Complete If Known Application Number TBD for FY 2003 Filing Date Herewith First Named Inventor Christo P. Bojkov, et al. Examiner Name TBD Express Mailing Label No.: EV334469326US Group / Art Unit TBD

TOTAL AMOUNT OF PAYMENT (\$) 914.00				Attorney Docket No. TI-35951							
METHOD OF PAYMENT				FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge to the following Deposit Account,					ADDITI	ONAL	FEES				
Deposit Account Number		20-0668		rge e de	Entity Fee (\$)	Small Fee Code	Entity Fee (5)	Fee	Description	Fee Paid	
Deposit Account Name	Texas Ins	struments Incorporated			130 50	2051 2052	65 25	Surcharge - lat Surcharge - lat cover sheet.	e filing fee e provisional filing fee or		
Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment				53	130	1053	130	Non-English s			
overpayment dean any overpayment					2,520		2,520	For filing a req	uest for reexamination		
2. Payment Enclosed:					920*	1804	920*	Requesting pu Examiner action	ublication of SIR prior to ion		
Chec		Money Other	186	05	1,840*	1805	1,840*	Requesting pu Examiner action	blication of SIR after n		
FE	E CALCU	JLATION	12	51	110	2251	55	Extension for r	eply within first month		
1. BASIC FILING	FEE				420	2252	200		me within second month		
Large Entity Small	l Entity				950	2253	460		me within third month		
Fee Fee Fee	Fee	Fee Description Fee Paid			1,480	2254 2255	720		ne within fourth month		
Code (\$) Code	***				2,010 330	2401	980		ne within fifth month		
1001 770 2001 1002 330 2002	370 165	Utility filing fee \$770			330		160 160	Notice of Appe	support of an appeal		
1002 530 2002		Design filing fee \$ Plant filing fee \$			290	2403	140	Request for or			
1004 740 2004		Plant filing fee \$ Reissue filing fee \$	14	51	1,510	1451	1,510	Petition to inst	institute a pubic use proceeding		
1005 160 2005		Provisional filing fee \$	14	52	110	2452	55	Petition to revi	ve - unavoidable	<del>  </del>	
			14	53	1,330	2453	640	Petition to revi	ve - unintentional		
	`	SUBTOTAL (1) (\$)770			1,280	2501	640	Utility issue fee	· ·		
2. EXTRA CLAIM	I FFFS			-	460 620	2502 2503	230 310	Design issue fee			
3. EXTIGUES 11.1		4 7 7			130	1460	130		Commissioner		
	Extra Cla	Fee from aims below Fee Pald	18	01	770	2801	370	Request for Co	entinued Examination (RCE	·	
Total Claims 28 -2	20**= 8		18	06	180	1806	180	Submission of	Information Disclosure Stm	t.	
Independent 3 -3	3" = 0	x 18 = 144 x 86 = 0	80	21	40	8021	40		h patent assignment per number of properties)		
Claims Multiple Dependent	<u> </u>	260 =			740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))			
**or number previously paid, if greater; For Reissue, see below				10	740	2801	370	For each additional invention to be examined (37 CFR 1.129(b))			
Large Entity Sma Fee Fee Fee		Eoo Desertation									
Code (\$) Cod 1202 18 220	le (\$)	Fee Description Claims in excess of 20	c	Othe	r fee (s	pecify)	•			<del></del> 1	
1201 86 220	1 42	Independent Claims in excess of 3									
1203 280 220		Multiple dependent claims in excess of	fЗ								
1204 86 220	4 42	**Reissue independent claims over	.								
1205 18 220	5 9	original patent **Reissue claims in excess of 20 and	l c	the	r fee (s	pecify)	' —				
over original patent SUBTOTAL (2) (\$)144					*Reduced by Basic Filing Fee Paid SUBTOTAL (3)						
						<del></del>			Complete (if appli	cable)	
SUBMITTED BY Michael K. Skrehot									Reg. Number	36,682	
Typed or Printed Name					T		Date		Deposit Account User ID	00,002	
Signature		www				10-2	Date .0-03				